

# State of the County Health Report 2017



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## Purpose

The mission of the Lee County Health Department is to emphasize prevention as we: monitor and respond to environmental issues, provide access to health care for those who are in need, prevent and control the spread of disease, and promote healthy lifestyles in the community based on current patterns and guidelines.

The Lee County Health Department and LeeCAN (Community Action Network) conducted a Community Health Assessment in 2014. The following health priorities were identified for the county: obesity, teen pregnancy, mental health/substance abuse. The purpose of the State of the County Health Report is to provide an update to the community on the progress made in the past year in addressing health priorities identified by the most recent Community Health Assessment (CHA).



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## Lee County Demographics

### Population Update

According to the U.S. Census, Lee County's estimated population as of July 1, 2016 was 59,616 compared to the 2010 estimated population of 57,856. The primary races/ethnicities are White (74.8%), Black/African American (20.3%), and Hispanic/Latino (18.6%). Eighteen percent of the population in Lee County is Hispanic/Latino compared to 9.2% of North Carolina's population overall. Between 2012-2016 11.2% of Lee County residents were foreign born compared to 7.7% for the state of North Carolina. Females make up 51.3% of the county population and males make up 49.7%.

	Lee County	North Carolina
Total Population	59,616	10,146,788
Percent White	74.8	71.0
Percent African American	20.3	22.2
Percent Hispanic/Latino	18.6	9.2
Percent American Indian and Alaskan Native	1.3	1.6
Percent Asian	1.3	2.9
Two or More Races	2.1	2.2

Source: US Census Quick Facts

Lee County's median household income (2012-2016) was \$46,402 compared to NC's median household income of \$48,256. The percentage of persons living in poverty as of 2016 in Lee County was 16.9% compared to NC's 15.4%. The percent of persons without health insurance decreased from 17.5% in 2016 to 15.8% in 2017

	Lee County	North Carolina
Median household income (2012-2016)	\$46,402	\$48,256
Persons in poverty, percent	16.9	15.4
Unemployment (December 2016)	4.9	4.4
Percent Persons without health insurance, under age 65	15.8	12.2

Source: US Census Quick Facts and US Department of Labor, Bureau of Labor Statistics

### Lee County Health Priorities

During the 2014 CHA, Lee County residents identified the top three health concerns of the community: Obesity, Substance Abuse/Access to Mental Healthcare, and Sexually Transmitted Infections/Teen Pregnancy. The 2017 SOTCH Report discusses each health priority, and the actions being taken or planned during the most recent year to address each priority. Taskforces are in place in the community to address each health priority identified.

## Review of Major Morbidity and Mortality Data

According to the 2016 mortality statistics, Lee County's top five leading causes of death in order were: Cancer, Heart Disease, Alzheimer's Disease, Chronic Lower Respiratory Disease and Diabetes Mellitus. The top four causes of death remained the same from 2015, but Diabetes Mellitus replaced Chronic lower respiratory disease as the fifth most common cause of death in 2016. Overall, there was a 15% decrease in the total number of deaths in Lee County from 2015 to 2016, with a significant decrease in deaths from heart disease.

### Leading Causes of Death in Lee County 2015/2016

2016 Rank	Cause	2016	2015
1	Cancer	141	121
2	Diseases of the heart	99	148
3	Alzheimer's disease	32	31
4	Chronic lower respiratory disease (COPD)	31	32
5	Diabetes Mellitus	20	8
Total Deaths – All Causes		633	539

Source: NC State Center for Health Statistics

Lee County experienced a decrease in heart disease, cancer, chronic lower respiratory disease and cerebrovascular death rates from 2010-2014 and 2011-2015. However, Lee County death rates for heart disease, cancer and Alzheimer's disease continue to remain higher than the death rates for the state of NC overall.

### Lee County Death Rates

Rank	Cause	2011-2015	2012-2016	North Carolina 2012-2016
1	Diseases of the Heart	182.8	169.2	161.3
2	Cancer – all sites	186.6	176.6	166.5
3	Chronic lower respiratory disease	45.6	42.6	45.6
4	Cerebrovascular disease	44.4	41.5	43.1
5	Alzheimer's disease	30.1	34.4	31.9

Source: NC State Center for Health Statistics – 2017 County Health Data Book

Infant mortality rate measures the number of deaths of infants less than 12 months of age. The infant mortality rate for Lee County decreased from 8.9 deaths per 1,000 during 2011-2015 to 7.4 deaths from 2012-2016.

2016 Infant Mortality Rate	Lee County	North Carolina
	7.4	7.2

Source: NC State Center for Health Statistics

## Obesity Reduction Update

In late 2016 Lee County was one of four counties in North Carolina to receive a two year grant to focus on increasing access to healthy food and physical activity. Lee County, along with Edgecombe, Halifax and Northampton counties were identified by the Centers for Disease Control (CDC) as areas in the country with higher rates of obesity. Grant funds were used to establish Health Matters, a collaborative project between NC State University and NC Cooperative Extension. During 2017, the Lee County Health Matters associate (HMA), NC Cooperative Extension staff, and NC State Health Matters staff worked to build partnerships with local health-focused coalitions and organizations, such as LEEding Toward Wellness, to increase their capacity for improving the health and wellness in the county.

In addition, the NC State Health Matters team created asset maps of Lee County to determine the distribution of community assets. Maps used existing data from several sources including the NC Department of Transportation, Division of Public Health, Parks and Recreation Department, and the USDA. Maps included locations of schools, parks, food outlets, food outlets accepting SNAP/EBT, faith communities, sites with known shared use agreements, streets and major highways. NC State Faculty, the Lee County Extension Director, Family & Consumer Science agent and HMA used the maps to identify concentrations of resources and discuss community assets. The mapping activity provided insight for the HMA to pave the path of the key informant interviews to focus on identified communities in the counties, and harness the assets within these identified community zones among community coalitions, like LEEding Toward Wellness.

Members of LEEding Toward Wellness work with Health Matters to identify and implement additional strategies and projects to increase access to physical activity and healthy eating. Several projects were initiated in 2017, including funding for bicycle racks in Sanford, soccer goals at Primera Iglesia Bautista, pickleball equipment for First Baptist's health and wellness center, direct education classes about safe and healthy food preparation at El Refugio, new signage for Cooperative Extension's Pollinator Garden, the development of a Lee County Diabetes Resource guide, and new tents for the Sanford Farmers' Market.



In addition to this work, Cooperative Extension offered various nutrition education classes related to their Family and Consumer Sciences (FCS) and Expanded Food and Nutrition Education (EFNEP) programs. These classes focused on food shopping on a budget, planning meals, expanding cooking skills, and increasing physical activity. A total of 44 individuals participated in these programs.

EFNEP Class at the Cooperative Extension office

The following outcomes are based on aggregate data collected from all of these classes:

50% (18 of 36) participants plan to prepare more meals at home

55% (20 of 36) participants increased their consumption of fruits and vegetables

44% (12 of 27) participants increased consumption of whole grains

33% (9 of 27) participants increased physical activity

## Teen Pregnancy Prevention Update

In 2016 there were 84 teen pregnancies in Lee County. Nineteen or 22.6 percent of those pregnancies were repeat pregnancies. The teen pregnancy rate for NC is 28.1 per 1,000 15-19 year old girls. The teen pregnancy rate for Lee County is 43.1 per 1,000. Lee County ranked 11<sup>th</sup> for teen pregnancies in the state of North Carolina in 2016.

The Coalition for Families teen pregnancy prevention programs have made a positive impact on Lee County's teens. During the 2016-2017 school year, both Smart Girls and the Teen Outreach Program® (TOP®) were offered at East Lee Middle School and West Lee Middle School, The TOP® Program was also implemented at Lee County High School. Between both programs, an estimated 275 students were served during the school year!

At East Lee Middle School, Smart Girls was offered during 7<sup>th</sup> and 8<sup>th</sup> grade female health classes, while TOP® partnered with the Advancement Via Individual Determination (AVID) program. Around 100 teens were served at East Lee Middle School in both programs. TOP® also partnered with the AVID program at Lee County High School, serving around 85 teens. At West Lee Middle School, Smart Girls was offered to 8<sup>th</sup> grade girls during the fall and 7<sup>th</sup> grade girls during the spring once a week during the teens' scheduled exploratory time. TOP® served 8<sup>th</sup> grade teens at West Lee Middle School during the scheduled exploratory time as well. 45 teens were served at the West Lee Middle School campus. The partnership between Lee County Schools and the Coalition for Families is a great way to provide services to teens throughout Lee County.



TOP field trip to UNC-CH campus

The Coalition's Adolescent Parenting Program (AP2) served 36 teen parents in 2017. The teen parents were offered the *Be Proud! Be Responsible! Be Protective!* Curriculum. The Adolescent Parenting Program exists to promote high school graduation among teen parents, delay subsequent pregnancies, and prepare their children for kindergarten.

In fall of 2017, the Coalition's Adolescent Pregnancy Prevention Program (AP3), in conjunction with Lee County Schools, began implementing the *Reducing the Risk* curriculum during 9<sup>th</sup> grade health classes with great success. An estimated 800 students will be served during the 2017-2018 school year.

## Mental Health Partners Update

The 6<sup>th</sup> Crisis Intervention Team (CIT) training took place in Lee County in May of 2017. Eight officers from Sanford Police Department and Lee County Sheriff's Department participated in the training. CIT training is a nationally recognized training that provides law enforcement with information on mental health conditions and skills to react appropriately and effectively to situations involving mental illness. The first CIT training took place in Lee County in 2012 and a total of 86 law enforcement officers in the county have been trained.

Sandhills Center, in conjunction with the Sanford Police Department, piloted an eight-hour Crisis Intervention Team (CIT) refresher session in September. Five members of the Sanford Police Department graduated from the course, which was held during the week of Sept. 18, 2017. Lee County Health Department, Central Carolina Hospital and Central Carolina Community College coordinated the training with Sandhills Center. Sgt. Gregory Deck of the Sanford Police Department served as the host officer.



May 2017 CIT Graduates

## Project Lazarus

The opioid epidemic is still ongoing nationwide and in Lee County. On June 29<sup>th</sup>, 2017 Governor Roy Cooper signed into law The Strengthen Opioid Misuse Prevention (STOP) Act. The law limits the amount of days doctors can prescribe opioids for up to 5 days for acute injuries and 7 for surgical procedures. While there was a downward trend in opioid overdoses from prescription opiates, there was an increase in the use of heroin, fentanyl and fentanyl analogues. In 2017 there were a total of 59 opioid overdoses, 48 of which were attributed to heroin. The number of heroin overdoses quadrupled from 12 in 2016 to 48 in 2017. Heroin related Emergency Department visits also increased from 32 to 71. County Emergency Management Services administered naloxone 96 times in 2017 compared to 54 in 2016.

Lee County Sheriff's Department began carrying naloxone in the fall of 2016. This past year approximately 6 opioid overdoses were reversed by Sheriff's Deputies carrying Narcan nasal spray. Sanford Police Dept began carrying naloxone in 2017 and have used their kits to reverse at least 6 overdoses in the community.



Drug Take Back Day, October 2017

In October a medication take back day was held at the Dennis Wicker Civic Center in collaboration with the county's household hazardous waste take back day. Information about medication safety and the permanent drug take back boxes in the county was provided to residents during the event. Sanford Police Department oversaw the take back of medications. Approximately 50 pounds of medication was collected.

## New Initiatives

### Safe Plates

In June of 2017, Lee County Environmental Health and Lee County Cooperative Extension began offering the NC Safe Plates program as a replacement to ServSafe. NC Safe Plates is a food safety curriculum developed by NC State University. The course helps food establishments meet the NC requirement of having at least one supervisor certified as a food protection manager, per the 2013 FDA Food Code. NC Safe Plates is taught through case studies, storytelling, activities, and discussion. Training topics include: personal hygiene, purchasing and storing food, cross-contamination, handling allergens, pest control, facility design and temperatures for holding, storing and preparing foods.

NC Safe Plates is designed to provide managers the skills needed to obtain the American National Standard Institution (ANSI) approved Food Protection Manager Certification. Certification is based on passing the ANSI approved exam from the National Registry for Food Safety Professional. The certification is accepted throughout the US and last for 5 years. Two Safe Plates trainings with a total of 22 attendees were held in 2017.

### S3 Housing Connect



*S3 Housing Connect* is a homelessness task force with a goal to bring together needed resources to create a coordinated approach to ensure that homelessness is a rare, brief, and non-recurring experience. The local initiative grew out of a project where 22 individuals were found living in substandard conditions in a condemned, uninhabitable building. Interested elected officials and community agencies began meeting in February 2017 and then established a taskforce in June.

Orchestrated by Sanford's Mayor, City Councilmen and city and county staff; the task force met monthly and worked on strategies to address the local homeless population. The task force is comprised of 13 voting and 8 non-voting members and has six committees: Low Barrier Shelter, Service Provision, Housing Committee, Data and Metrics, Community Engagement and Resource Development. The name S3, stands for the three tenets of shelter, service and stability.

In Fall 2017, the Data and Metrics committee conducted an informal point in time count. 64 individuals, mostly between the ages of 24 and 60, were found to be homeless according to the HUD definition. Unemployment was the primary reason for being homeless with domestic violence being secondary.

One of the successes of the initiative, *S3 Housing Connect* and the Bread of Life Ministries opened an extreme weather shelter located on Maple Avenue in December. The shelter is designed to be open whenever the temperature drops below 32. Other successes have centered on the work of the committees toward service provision and strategies for future analysis and development of affordable housing. The extreme weather shelter was open for 11 days in December, reaching 87% capacity.

## Changes in Data

Teen pregnancy increased in the county from 76 teen pregnancies in 2015 to 84 teen pregnancies in 2016. The most recent year for which teen pregnancy data is available is 2016. The 2016 teen pregnancy rate for Lee County was 43.1 per 1,000 15-19 year old girls. The NC teen pregnancy rate for NC overall was 28.1 per 1,000. Lee County was ranked 11<sup>th</sup> amongst NC counties for teen pregnancy rates.

Following state and national trends, there was also an increase in the number of opioid overdoses in the county in 2017. While there was a downward trend in deaths from prescription opiates alone, overdoses involving heroin, fentanyl or a fentanyl analogue quadrupled from 2016 to 2017. In 2016, there were a total of 37 opioid overdoses and 12 of those were due to heroin. In 2017, the total number of opioid overdoses increased to 59 with 48 of those overdoses attributed to heroin.



## Emerging Issues

### Electronic Nicotine Delivery Systems (ENDS)

Each year there is an increased prevalence of Electronic Nicotine Delivery System (ENDS). ENDS include a long range of products such as: e-cigarettes, vape pens, and e-hookah. They are made to look like traditional cigarettes while others are made to look like a pen or a USB drive. ENDS products are still relatively new therefore; there is not currently any available data about the long-term effects of the using ENDS. However, health effects that we do know include: the addictiveness of nicotine, aerosol containing cancer causing agents and the batteries are prone to overheating causing burns and at times explosions. According the Centers for Disease Control in 2016, more than 2 million U.S. middle and high school students used e-cigarettes in the past 30 days, including 4.3% of middle school students and 11.3% of high school students.

A new product that is increasing in popularity, particularly among youth, is the e-cigarettes that resemble a USB device called JUUL. The device even goes so far as to charge when plugged into a computer. According to research conducted by the Truth Initiative 25% of users do not consider using the product as vaping, rather they refer to it as “JUULing”. Additional research conducted from the Truth Initiative showed that teen and young adult JUUL users (37%) are unsure whether the product contains nicotine. Each device contains 0.7mL of e-liquid and 5% nicotine. That amount of nicotine is equivalent to one pack of traditional cigarettes.



JUUL device